



# APPLICATION ENGINEERING PLANCHECK E-23

**Development Services**  
**Engineering Department**  
 1635 Faraday Avenue  
 760-602-2750  
 www.carlsbadca.gov

**Complete all appropriate information. Write N/A when not applicable.**

Project Name: _____ Date: _____	
Project Description: _____ _____	
Project Address: _____	
Lot No(s): _____	Map No.: _____ APN(s): _____
Number of Lots: _____	Number of Acres: _____ Miles of Trails: _____
Owner: _____ Mailing Address: _____ _____ Phone Number: _____ Fax Number: _____ E-mail: _____ I certify that I am the legal owner and that all the above information is true and correct to the best of my knowledge. Signature: _____ Date: _____	Applicant: _____ Mailing Address: _____ _____ Phone Number: _____ Fax Number: _____ E-mail: _____ Signature: _____ Date: _____
Civil Engineer: _____ Firm: _____ Mailing Address: _____ _____ Phone Number: _____ Fax Number: _____ E-mail: _____ State Registration Number: _____	Soils Engineer: _____ Firm: _____ Mailing Address: _____ _____ Phone Number: _____ Fax Number: _____ E-mail: _____ State Registration Number: _____
Additional Comments: _____ _____ _____ _____	
<b>IMPROVEMENT VALUATION</b> 1. What water district is the proposed project located in? (check one) <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Carlsbad Municipal Water District           <input type="checkbox"/> Olivenhain           <input type="checkbox"/> Vallecitos         </div> 2. If in the Carlsbad Municipal Water District, what is the total cost estimate, including the 15% contingency fee, for water and reclaimed water improvements, sewer (for Carlsbad Municipal Water District only), street, public (median) landscape and irrigation, and drainage improvements (if applicable)? \$ _____	
<b>GRADING QUANTITIES</b> cut _____ cy      fill _____ cy      remedial _____ cy      import _____ cy      export _____ cy	



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APPLICATION FOR (check all that apply)	FOR CITY USE ONLY			Comments
	Project I.D.	Drawing Number	Deposit /Fees Paid	
<input type="checkbox"/> Adjustment Plat (ADJ)				
<input type="checkbox"/> Certificate of Compliance (CE)				
<input type="checkbox"/> Dedication of Easement (PR)				
Type: _____				
Type: _____				
<input type="checkbox"/> Encroachment Permit (PR)				
<input type="checkbox"/> Final Map (FM)				
<input type="checkbox"/> Grading Planchek (DWG)				
<input type="checkbox"/> Improvement Planchek (DWG)				
<input type="checkbox"/> Parcel Map (PM)				
<input type="checkbox"/> Quitclaim of Easement (PR)				
Type: _____				
<input type="checkbox"/> Reversion to Acreage (RA)				
<input type="checkbox"/> Street Vacation (STV)				
<input type="checkbox"/> Tentative Parcel Map (MS)				
<input type="checkbox"/> Certificate of Correction (CCOR)				
<input type="checkbox"/> Covenant of Easement (PR)				
<input type="checkbox"/> Substantial Conformance Exhibit (SCE)				
<input type="checkbox"/> Trails <input type="checkbox"/> < mile <input type="checkbox"/> > mile				
<input type="checkbox"/> Other				

APPLICATION ACCEPTED BY:

DATE STAMP  
APPLICATION RECEIVED